

INSTRUCTIONS FOR COMPLETING THE APPLICATION FORM FOR ELEVATORS, ESCALATORS AND RELATED TRANSPORTATION

FORM SBD-22 (REV 4/04)

The information you are asked to provide is essential to the processing of your application and performing the plan review and inspection. If items are left blank delays will likely occur in processing the material and issuing approval to proceed with your project. Information is entered into a database that allows for scheduling of annual inspections and applying appropriate codes throughout the life of the unit.

Please complete both sides of the form and refer to the appropriate box and/or line when utilizing these instructions.

The box containing in the upper left is used to link this installation, alteration, repair, etc. to an existing building or petition for variance. If building construction or alteration was reviewed and approved by the Department of Commerce, enter the Building Plan Review Transaction ID Number from the building plan approval letter. If a petition for variance was approved for this installation, alteration, repair, etc. include the Petition for Variance Transaction ID Number from the petition approval letter.

Box 1. Use. Check the box for the type of unit you are planning to install, alter, repair, etc. The Date of Contract is required. The date of contract is the date the legal document was signed between the submitter (elevator, dumbwaiter, escalator or lift contractor) and the owner/agent to provide the service and is used to determine the applicable code editions.

Box 2. Type of Submittal. Check the proper box. For a complete replacement, alteration or emergency repair include State Tag Number or Regulated Object Number of the existing unit.

Box 3. Project Site Information. Complete project name and street address. City, village or town and county information is required. If the building has more than one elevator, dumbwaiter, escalator or lift include the number for this unit here. If the site includes multiple buildings or is a building with multiple tenants, include the building designation or tenant name.

Box 4. After plans are reviewed. Check the appropriate item to receive approved plans by picking up or by mail.

Box 5. Installer information. Customer 1 - Elevator, dumbwaiter, escalator or lift contractor performing the work, usually the submitter of the plans and application. Customer 2 - Owner of the building in which the work is being performed. Customers 3 and 4 - Requesting Party or Other may be used as a "mail to" indication if approved plans are to be mailed to a party other than the submitter.

Total Amount Due section. Enter total amount from fee schedule in Box 9, side 2.

Box 6. General Equipment Information. Complete all information.

Box 7. For alterations, repairs or remodels of existing equipment list items from Comm 18, Tables 18.1013-1 through 7 that apply, or a project specification or other list may be provided as described in Box 10 of the application form under "Alterations".

Box 8. Specific Equipment Information. Complete all applicable information for new installations. For alterations, repairs or remodels of existing equipment, complete any information that will be changing as part of the work.

Box 9. Fees. Please determine the appropriate fee and attach the check to the front of the form.

Box 10. Information Required with Applications. To avoid delays in the review process please read the requirements of this box to ensure all information is submitted for new installations or alterations or emergency repairs. In addition to Box 10 please also note the following:

- If the submitter would like two copies returned as is customary, please send a minimum of three copies of plans and applications. We will archive one set and send at least two sets back to the submitter. [See Comm 18.1009, Installer must make one set available at the construction site prior to and during construction]. If we receive three sets or more than four we will retain one and return the remainders to the submitter.
- A shop drawing stamp containing the name of the firm employing the supervising professional and signature or initials of an employee of that firm must appear on at least one set of the shop drawings, or a note as described in Box 10 of the application form will be accepted. At least one set must contain the original stamp or note. The other three may be photocopies. The shop drawing reviewer's comments can appear on these drawings but cannot include a rejection of the plans.
- If plans are multiple pages, each set must be bound (stapled) in sets as they were reviewed by the supervising professional or an employee of the supervising professional.

Line 11. Applicant Signature. Please sign and date the form.

If you have any questions about required information, please contact Brian Rausch, at (262) 521-5444.